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| 3.                          | CLASSIFICATION   |  |                |   |                          |
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| 15th Century           | ☐ 17th Centu                   | ury 🔲        | 19th Centur    | ン□                   |                          |
| SPECIFIC DATE(S) (If A | pplicable and Known)           |              |                |                      |                          |
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| Prehistoric            | ☐ Engineering                  |              | Religion/Phi-  |                      | Other (Specify)          |
| Historic               | Industry                       |              | losophy        |                      | 111                      |
| Agriculture            | Invention                      |              | Science        |                      | Melectu                  |
| Art                    | Landscope                      | !            | Sculpture      |                      | -                        |
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| 9.    | MAJOR BIBLIOGRAPHICAL REFERENCES   |           |             |       |  |       |         |              |  |          |                |          |  |  |
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| 10    |  | RAPHICAL  |             |       | DE COORDIA                             |       |         | ·<br>        | LATITUDE AND LONG                                      | GIT      | UDE COORDINAT  | F e      |  |  |
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| - 1   | LIST ALL STATES AND COUNTIES FOR PROPERTIES OVERLAPPING STATE OR COUNTY BOUNDARIES  STATE:  CODE COUNTY  CO  |           |             |       |  |       |         |              |  |          | CODE           |          |  |  |
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| 11    | 1. FORM PREPARED BY  |           |             |       |  |       |         |              |  |          |                |          |  |  |
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|       | ORGANIZATION   |           |             |       |  |       |         |              |  |          | DATE           |          |  |  |
|       | STREET   | AND NUME  |             | -     | •                                      |       |         |              | · · · · · · · · · · · · · · · · · · ·                  |          |                |          |  |  |
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| 3~    | STATE LIAISON OFFICER CERTIFICATION  |           |             |       |  |       |         |              | NATIONAL REGISTER VERIFICATIO                          |          |                |          |  |  |
| 12    | STATE  | LIAISON   | OFFIC       | ER CE | KIPICATI                               | UN    |         | #            | NATIONAL REGIST  | EX       | VERIFICATION   | 11 11    |  |  |
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|       | As the designated State Liaison Officer for the Na-<br>tional Historic Preservation Act of 1966 (Public Law  |           |             |       |  |       |         |              | I hereby certify that this property is included in the |          |                |          |  |  |
|       | 89-665), I hereby nominate this property for inclusion   |           |             |       |  |       |         | 1            | National Register.                                     |          |                |          |  |  |
|       | in the National Register and certify that it has been  |           |             |       |  |       |         |              |  |          |                |          |  |  |
|       | evaluated according to the criteria and procedures set forth by the National Park Service. The recommended   |           |             |       |  |       |         |              |  |          |                |          |  |  |
|       | level of significance of this nomination is:   |           |             |       |  |       |         |              | Chief, Office of Archeology and Historic Preservation  |          |                |          |  |  |
|       | National   |           |             |       |  |       |         |              |  |          |                |          |  |  |
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| Title |  |           |             |       |  |       |         |              |  |          |                |          |  |  |
|       |  |           |             |       |  |       |         |              | Keeper of The National Register                        |          |                |          |  |  |
|       |  |           |             |       |  |       |         |              |  |          |                |          |  |  |
|       | Date   |           |             |       |  |       |         |              | Date   |          |                |          |  |  |